PTO/SB/17 (02-07)
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL.				Complete If Known					
				<del></del>		10/019,949-Conf. #6273			
				<del></del>		January 7, 2002			
				Approximation and the contract of the contract		Kazuhiro NAKASHIMA			
For FY 2007				Examiner Name G. Gab		G. Gabel	abel		
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	1641	\$1			
TOTAL AMOUNT OF PAYMENT (\$) 900.00			Attomey Docket No.		0397-0438P				
METHOD OF PAYMENT (check all that apply)									
Check Credit, Card Money Order None, Other (please identify):									
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
X Charge any additional fee(s) or underpayments of X Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
	FILIN	G FEES Small Entity	SEA	ARCH FEES Small Entity	EXAMIN	ATION FEES			
Application Type	Fee (\$)	Fee (\$)	Fee (\$		Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)	
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65		***************************************	
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300	***************************************		
Provisional	200	100	Ó	0	Ø-	0	·	· · · · · · · · · · · · · · · · · · ·	
2. EXCESS CLAIM FEES							***************************************	Small Entity	
Fee DescriptionFee (\$)Fee (\$)Each claim over 20 (including Reissues)5025									
Each independent claim over 3 (including Reissues)							200	100	
Multiple dependent claims 360							180		
				Paid (\$)	8.50	itiple Depende			
<u>Total Claims</u>				۵,۵ (۴)			ee Paid (		
HP = highest number of total of	daims paid for, if g	reater than 20.	**********		<u>v x-x</u>	-7 <del>-8-1</del> -2	00 7 000 1	<u>**</u> 2	
			aid (\$)						
2 4=	×	<b>2</b>							
HP = highest number of indep	endent claims paid	for, if greater than	3.						
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
	Extra Sheets			dditional 50 or frac	tion thereof	Fee (\$)	Fee	Paid (\$)	
- 199 = /50 (round up to a whole number) x =									
4. OTHER FEE(S) Fees Paid (S)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1253 Extension for response within third month 900.00									
SUBMITTED BY	***************************************	**************************************	***************************************			***************************************	***************************************	***************************************	
Signature ///	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						Telephone (703) 205-8000		
Name (Print/Type) Marc S	Weiner			***************************************	•••••	Date 88	AY 1 A	2007	